

Application No.: 09/912,670  
 Filed: July 23, 2001  
 TC Art Unit: 1644  
 Confirmation No.: 6394

Rev 10/03

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Date: November 13, 2003

Via Facsimile  
**COMMISSIONER FOR PATENTS**  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Attorney  
 Docket No.: ERIZY-114AX

Sir:

In re application of: Andrew W. Taylor et al.

Entitled: ACTIVATION OF REGULATORY T CELLS BY ALPHAMELANOCYTE STIMULATING HORMONE

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- [ ] This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$ \_\_\_\_\_) per §1.17(e).  
 [ ] Enter the unentered amendment previously filed on \_\_\_\_\_ per §1.116.
- [X] A Petition for Extension of Time for 1 month is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$55.00) per §1.17.
- [X] In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby mad and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.

[ ] \_\_\_\_\_ is hereby appointed Associate Attorney by:

Registration No.:

Attorney of Record:  
 Registration No.:

[ ] Other:

| CLAIMS AFTER AMENDMENT:   | MINUS PRIOR PAID CLAIMS: | EQUALS PRESENT EXTRA CLAIMS: | RATE:                   | ADDITIONAL FEE: |
|---|--------------------------|------------------------------|-------------------------|-----------------|
| Independent   | 14 - 14                  | = -0-                        | x \$86.00 =             | -0-             |
| Total   | 63 - 63                  | = -0-                        | x \$18.00 =             | -0-             |
| [ ] Multiple Dependent Claims (1st presentation)                        |                          |                              | + \$290.00 =            | -0-             |
|   |                          |                              | SUBTOTAL ADDITIONAL FEE | -0-             |
| Small Entity filing, divide by 2. Small Entity status must be asserted. |                          |                              |                         | -0-             |
|   |                          |                              | ADDITIONAL FEE          | -0-             |

[X] No additional fee. [ ] The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$ \_\_\_\_\_) for the cost of same.

[X] The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Gerald R. Ewoldt, TC Art Unit 1644, Fax No. (703) 872-9306, on Nov. 13, 2003.



Attorney of Record: Holiday C. Heine, Ph.D.  
 Registration No.: 34,346

SUBMIT IN TRIPPLICATE  
 HCH/knr/298342-1